FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J84330 CENTRAL FLORIDA BILLING, INC.

(6)

Mailing Address

FILED May 06 1997 8:00am Secretary of State

5901 SUN BLVD STE 100A) .		5901 SUN BLVD. STE 100A								
ST. PETERSBUR	RG FL 33715		ST. PETERSBURG FL 30	3715-1166			-	3. Date Incorporated or Qualified	20 [Date of Last Re	nort.
							ļ	07/27/1987		/01/1996	port
2. Principal Place of Business			2a. Mailing Address				4. FEI Number		<u> </u>	phed For	
21			26 Control Marketon					59-2828702			t Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State			City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip 24	Country 25	· +	Zip Country 30				 This corporation has liability for intangible tax under s. 199.032, Florida Statutes X Yes ☐ No				
	9. Name and Addre							0. Name and Address of New Re	gistered	l Agent	
	A, VIRGILIU			ļ	B1	Namo	e				
	SUN BLVD.		82 Str			Street	et Address (P.O. Box Number is Not Acceptable)				
	'E 100A Petersburg fl 337	/15			83				····		
VI. I	EIBHADANA I E AO				84	City			<u> </u>	85 Zip C	Code
					L	L			FI	_	!
 office or r 	to the provisions of Sect registered agent, or both im familiar with, and acc	∟in the State of £	Jorida, Such change wa	as authorize	dbν	/ the co	orporation'	tion submits this statement for the r 's board of directors. I hereby accep	ot the ap	pointment as	registered
SIGNATURE	Signature, typed or printed name	e of registered agent an	dittle Lappicable (I	NO1E: Registere	d Ago	ent signatu	are required w	then reinstating)	DATE		
12.		FFICERS AND D	~~~~~	13.				ADDITIONS/CHANGES TO OFFIC	CERS AN		
TITLE	PD		☐ DELETE	1.1 TI	ILE					Change	Addition
NAME	VIRGILIU, POPA	M 1975 4004		1.2 N.							
STREET ADDRESS	5901 SUN BLVD., S					ADDRESS	S				
CITY-ST-ZIP	ST. PETERSBURG	FL 33/13	DELETE	14C 21T		ST-ZIP				Change	Addition
TITLE NAME			בן טננונו	21 II			-			C thange	[Nontion
STREET ADDRESS						ADDRESS	s				
CITY-ST-ZIP						ST - ZIP	Š				
TITLE			DELETE	3.1 11		01 211				Change	Addition
NAME				3.2 N	AME						
STREET ADDRESS				3.3 S	TREET	ADDRESS	s				
CITY-ST-2IP				34 (11Y-	\$1 - 7IP					
TITLE			☐ DELETE	4.1 T	TLF				-	☐ Change	Addition
NAME				4.21	AME						
STREET ADDRESS				4.3 S	1REET	ADDRESS	s				
CITY-ST-ZIP	ļ <u> </u>		DELETE			ST - ZIP				Change	Addition
TITLE			☐ DELETE	5.1 1						LT cusuas	ויין אטטונוטוו
NAME				5.2 N		LADDOFES					
STREET ADDRESS						I AODRESS	9				
CITY-ST-ZIP TITLE			DELETE	54 C		ST - ZIP				Change	Addition
NAME				6.2 N							
STREET ADDRESS						T ADDRESS	s				
CITY-\$T-ZIP						ST - 21P					
7	by certify that the inform	nation supplied w	ith this filing does not q	uplify for the		metics	n stated in	Section 119.07(3)(i), Florida Statute	s. I furth	er certify that	the
Information I am an o appears	on indicated on this ann officer or director of the c in Block 12 or Block 13	ual report or supportion or the perporation or the perport of the perport of th	plemental annual report receiver or trustee em an attachment with an	is true and powered to address.	acc exec	urate ar cute this	ind that my is report a	section 13.07(3)/i, Florida Statute y signature shall have the same leg s required by Chapter 607, Florida	ai effect Statutes;	as if made und and that my r	per oath; tha' name